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ABSTRACT

The study examined relationships among factors influencing utilization of social services by Hispanic elderly, particularly factors categorized as: (1) informal, such as support groups of family, kin, neighbors, friends, and (2) quasi-formal, such as church groups. Thirty-seven variables and data selected from a 1979-80 15-state survey of 1,805 noninstitutionalized Hispanic individuals aged 55 and over were utilized. Data were categorized by the Andersen-Newman model of service use according to three factors: (1) predisposing (demographic, social structure, and beliefs); (2) enabling (living arrangements; family relationships, knowledge of social services, friendships, perceived neighborhood cohesiveness, age, urban/rural residency, church attendance, and family income); and (3) need for care (health status, functional ability, perceived need). Knowledge of formal social services was found to have the strongest direct effect on use of services. Informal and quasi-formal factors affected use of services by contributing to the development of awareness of service availability and information about use. Findings suggest a need for the formal social service system to integrate its programs into existing social organizations and support groups within the Hispanic community, to train staff to refer clients to appropriate community-based services such as church groups, and to use mass media which are bilingual and focus on the Hispanic community to disseminate information about social services. The study emphasizes the importance to policymakers and service providers of understanding the correlates and predictors of formal social service use by Hispanic elderly. (LFL)

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The Information Processing Role of the Informal and Quasi-Formal Support Systems Among the Hispanic Elderly: Implications for the Delivery of Formal Social Services*

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ABSTRACT

One of the basic issues in need of considerably more scholarly attention is the question of the relationship between informal and formal social support systems and the utilization of social services by the Hispanic elderly. This study examines this relationship using a nationwide sample of Hispanic elderly. The findings, in part, indicate that informal support systems do not directly effect the use of formal social services but, through their influences on other factors (i.e., income, knowledge of services, etc.), they exert significant indirect effects.

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The Information Processing Role of the Informal and Quasi-Formal Support Systems Among the Hispanic Elderly: Implications for the Delivery of Formal Social Services

INTRODUCTION

Our knowledge regarding the process and complexities of the utilization of formal social services by the Hispanic elderly empirically is rather limited. Little is known for example, about the role that family, kinship, friendship, and church-related support groups play in determining the use of formal social service by this group. The purpose of this study is to systematically examine the role of the quasi-formal (i.e., church-related support groups and activities) and informal support systems (i.e., family, kinship, and friendship support groups) in accounting for differences in formal social service utilization among the Hispanic elderly. Although, several descriptive studies exist that have explored the use of community social services by Hispanic elderly (Valle and Mendoza, 1978; Cuellar and Weeks, 1980; Lacayo, 1980), none of these has systematically attempted to develop and test explanatory causal models of social service utilization among the Hispanic elderly. As a result, much of the existing literature in this area suffers from a number of major drawbacks that limit its contribution to increasing our knowledge and for planning and providing human services to this sub-group.

The utilization of service by the elderly in general, has been found to be partially determined by various socio-demographic factors (Kutner et al., 1956; Shanas, 1962; Shanas et al, 1968; McKinlay, 1972; Neugarten, 1974; McCaslin and Calvert, 1975; Downing, 1978; Mindel and Wright, 1982).

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Several studies have found that social and psychological factors influence use (Coe and Wessen, 1965; Battistella, 1968; Fabrega and Roberts, 1972; Anderson and Newman, 1973; Bennett and Eckman, 1973; Harris, 1975; Lowry, (1979). Other studies suggest that economic, community, geographic, organizational, societal, and environmental factors are related to use (Palmore, 1972; McKinlay, 1972; Anderson et al., 1972; Hammerman, 1974; Cutler, 1975; Cantor, 1975; Cantor and Mayer, 1976; Ward, 1977). Still other studies suggest that the perception and intensity of needs, the knowledge of services, and the availability and accessibility of formal and informal support systems are critical factors influencing use (Lipman and Sterne, 1969; Mechanic, 1962; Gaspard and Hopkins, 1967; McKinlay, 1972; German, 1975; Wright et al., 1979; Hess and Markson, 1980; Mindel and Wright, 1982). In addition, the importance of the kinship and friendship systems in providing help and support to the elderly is well documented (Shanas, 1967; McKinlay, 1972; Shanas, 1973; Hays and Mindel, 1973; Hill, 1972; Staples, 1976; Shanas, 1979; Cantor, 1979; Dowd and Bengtson, 1978; Mindel and Wright, 1982). Moreover, a number of studies have demonstrated the positive adaptive and supportive aspects of the Hispanic kinship system (Moore, 1970; Grebler et al., 1970; Keefe et al., 1979; Wagner and Schaffer, 1980; Mindel, 1980; Baca Zinn, 1981).

Conceptual Framework.

The large number of variables that determine use of services requires a functional scheme sufficient for conceptually categorizing them. One such classification system has been proposed by Andersen and Newman (1973), and subsequently expanded by Ward (1977), for studying the utilization of services by the elderly. This creative framework conceptualizes the individual's

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demand for services as a function of a complex pattern of relationships among predisposing, enabling, and need for care factors. It suggests that some individuals have a higher propensity to use services based on certain background factors such as, demographic, social structural characteristics and attitudes, and beliefs (Predisposing Factor). Although, individuals may have different propensities to acquire services, the use of such services is also contingent on the availability and accessibility of these resources and the individual's family resources (Enabling Factor). Finally, assuming that the above conditions exist, the individual must recognize the presence of a need for services and be motivated to take some form of formal action before actual service use takes place (Need for Care Factor). This conceptual framework will, in part, be employed to classify the numerous variables used in this study and to analyze the overall process of social service utilization by the Hispanic elderly. The results should aid in assessing: 1) the various causes of differential use among the Hispanic elderly, 2) the role of the informal and quasi-formal support systems in determining differential use patterns, 3) the relative importance and magnitude of the direct and indirect effects of the determinants of use, and 4) the amount of variation in use which can be explained by the causal model. The major interest in this study is with informal and quasi-formal social systems as support structures and, in particular, with how these support systems operate to enhance or inhibit the use of formal social services by the Hispanic elderly.

METHODS

Data.

This study represents a secondary analysis of a data set that was

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collected in 1979-80 entitled "A National Study to Assess The Service Needs of the Hispanic Elderly" (Principle Investigator, Carmela G. Lacayo). The data was provided by the National Association for Hispanic Elderly and were gathered using a national multistage area probability sample of 1805 non-institutionalized Hispanic individuals age 55 and over with demographic and geographic stratification introduced in the first stage. The sample was stratified by geographical region to assure adequate representation of Hispanics in regions of highest Hispanic population. The sample was drawn from fifteen states with the states of California, Texas, Florida and New York representing a heavier sampling of elderly Hispanics. It is estimated that the sampling error is approximately 5%. The expected number of respondents was 1892; 1804 interviews were completed and processed.

The characteristics of the sample are: ethnic identity - Mexican American 59.3%, Puerto Rican 15.8%, Cuban 6.2%, and other Hispanic 18.8%; sexual composition - 48.6% males and 51.4% females; the mean age was 65.5; marital status - not married 47% and married 53%; mean education was five years; and mean income was $3,999 dollars.

The original study data were obtained from interviews administered in the respondent's home using a pretested instrument constructed by the National Association of Hispanic Elderly in consultation with the Administration of Older Americans (AOA), the United States Bureau of Census, and Kaiser Permanente Research Department. The resulting instrument was a combination of the Older American Resources and Services Functional Assessment Questionnaire (OARS) and the Subjective Distress Scale of Psychiatric Status Schedule (PSS). It was translated into Spanish and administered by bilingual interviewers. Thirty-seven variables were selected from this

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data for the current study and classified according to the Andersen and Newman (1973) framework, as shown in Figure 1.

Insert Figure 1 Here

Predisposing Factor.

Demographic Variables. The demographic variables were measured as follows: Nativity was dichotomized, (United States=1, Other=0); U.S. Citizen was dichotomized, (yes=1, no=0); and Age was measured by actual age. The Social Structural variables were measured as follows: Ethnicity was dummy coded, (Puerto Rican=1, Cuban=1, South/Central American=1, Mexican American=0); Education was measured by actual grade completed; Religion was dichotomized, (Catholic=1, Other=0); English Literacy was measured on a scale ranging from 1 through 5 (Seldom=1, All the time=5) and on a scale ranging from 1 through 3 (Very difficult=1, Not difficult at all=3) for the amount of difficulty with completing forms printed in English; Family Size was measured by actual number of children; Residential Stability was measured on a scale ranging from 0 through 5 (No other city=0, Five or more cities=5); Employment Status was dummy coded (Working=1, Housewife=1, Retired=0); and Occupational Classification Status measured using the United States Census Work Classification Code ranging from 0 through 100. Sex, Race, and Age Discrimination were each measured separately by summing the number of personal discrimination acts experienced by the respondent.

Enabling Factor.

The community variables were measured as follows: Urban or Rural residence was dichotomized, (Urban=1, Rural=0); Age Density was measured by the

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percentage of elderly residents in a census tract. Accessibility of Transportation was the number of blocks to the bus stop; Formal church Attendance ranged from 1 through 6 (Never=1, More than once a week=6); Participation in Senior Church Activities ranged from 1 through 5 (Never=1, Very often=5); Contact with Friends/Neighbors was measured on a scale ranging from 0 through 4 (None=0, Everyday=4); and Perceived Neighborhood Cohesiveness was measured by summing the number of reasons a respondent did not move.

The family variables were measured as follows: Living Arrangement was dummy coded (living alone=1, living with spouse=1, living with children=0); Annual Family Income was measured on a scale ranging from 1 through 15 (0-499=1, 40,000 above=15); Contact with Kin was measured separately for contact with children and relatives on a scale ranging from 0 through 4 (None=0, Everyday=4); and Knowledge of Formal Social Services was measured by summing the number of services out of 13 the respondent was aware of.

Need for Care Factor. The need variables were measured as follows: Self Rated Health Status was measured on a scale ranging from 1 through 5 (Very poor=1, Very good=5); and Functional Ability was measured by the interviewer. Perceived Need for Formal Social Services was measured by summing the number of services needed out of 13 mentioned by the interviewer.

Utilization. The Utilization of Formal Social Services was measured by summing the number of services used out of 13 mentioned by the interviewer. The thirteen services were: education courses to prepare for retirement; local rides; home delivered meals; meals at senior centers; assistance with housework; information about programs; legal aid; consumer

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education; food stamps; assistance with income tax; financial assistance for rent; financial assistance for medical care and recreational programs.

Method of Analysis.

The method of analysis used to ascertain the relative importance and interrelationship of the variables employed in the model was that of path analysis. In general, path analysis proceeds by solving a series of recursive regression equations in which each of the previously independent variables becomes the dependent variable in the next equation. The results indicate how much of the original correlation between the dependent and independent variables is accounted for by direct and indirect effects while at the same time controlling for the effects of all other variables in the equation (Kerlinger and Pedhazur, 1973; Schumm et al., 1980; Nie et al., 1975).

FINDINGS

The hypothesized causal model of utilization and the variables included in this study are presented in Figure 1. The model was transformed into a series of structural equations from which standardized partial regression coefficients (Beta weights or path coefficients) were estimated. The results of the procedure indicate that the need for care and enabling variables are the most important predictors of use whereas the predisposing variables, in general, take on a less important predictive role. Table 1 summarizes the associations between the variables employed in the model.

Insert Table 1 Here

Due to the large sample size it was felt that traditional significance

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tests, either on the Beta weight or on the increment of additional explained variance, would indicate numerous relationships that while statistically significant were superfulous or meaningless. In the interest of scientific parsimony only standardized partial regression coefficients that were both statistically significant at better than the .05 level and explained at least 1% of the variance were considered as important (Mindel and Wright, 1982).

The findings also indicate that only five of the original thirty-seven variables employed in the study directly effect the utilization of formal social services. These five variables, knowledge of social services (enabling), perceived need for social services (need), annual family income (enabling), self-rated health status (need), and ethnicity (predisposing) jointly account for 35% of the variance in formal service use. Additionally, knowledge of formal social service had the strongest direct effect on use (Beta-.45) and had no indirect effects. Presumably, the greater the older person's knowledge of formal social services the greater their inclination to use such services.

With respect to those variables that were conceptualized as attributes of the informal support systems of the Hispanic elderly (i.e., frequency of contact with family, kin, and relatives; contact with friends and neighbors, and living arrangements) and the variable viewed as an indicator of the quasi-formal support system (i.e., participation in different senior citizen groups and activities at church), none had significant direct effects on utilization. However, all of these variables had significant indirect effects on use vis-a-vis their direct impacts on family income and respondents knowledge of social services (See Table 1).

The type of living arrangements of the respondents was not directly

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predictive of use. However, the living with spouse variable indirectly effected use through its influences on family income and the need for services variables. Living with spouse was directly effected by sex (Beta=.38), age (Beta=-.18), occupational classification status (Beta=.04), English literacy (i.e., ability to read in English, Beta=.09), employment status (housewife, Beta=.06; working, Beta=-.01) and ethnicity (Puerto Rican, Beta=-.11; Cuban, Beta=.08;-Central/South American, Beta=-.06). Moreover, the living alone variable indirectly effected us through its influence on knowledge and family income. However, the indirect effect of living alone on family income appears to be spurious in nature and cannot be interpreted within the existing model. Living alone was directly effected by contact with friends and neighbors (Beta=.11), sex (Beta=-.16), age (Beta=.17) and ethnicity (Puerto Rican, Beta=.10; Cuban, Beta=-.07; South/Central America, Beta=.01).

The contact with relatives variable indirectly effected by U.S. citizenship (Beta=.10) and contact with friends/neighbors (Beta=.23).

The participation in senior citizens church groups and activities variable indirectly effected use through its influence on knowledge.

DISCUSSION

The findings from this study indicate that several of the variables conceptualized as informal (i.e., contact with relatives and contact with friends and neighbors) and quasi-formal (i.e., participation in senior citizens groups and activities at church) social support attributes are significantly related to the use of formal social services indirectly

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through their influence on increasing the older persons awareness of such services (i.e., knowledge of social services). On the one hand, those elderly who live alone, visit frequently with kin, friends/neighbors, and who regularly participate in senior citizens church groups and activities are more likely to have greater awareness of the availability of social services designed to meet their needs. As a result, this group is likely to consume more services than groups with other characteristics. It seems reasonable to surmise, therefore, that informal and quasi-formal support systems tend to serve as important linking mechanisms and referral sources, to formally organized services, for this group of Hispanic elderly. On the other hand, those elderly who are living with their spouses visit infrequently with kin, friends and neighbors, and who don't systematically participate in senior citizen church activities, are less likely to be knowledgeable about services, and as a result, consume fewer services. Also this group tends to be younger, in better overall health and have higher incomes than the group previously described. Moreover, as a group, even though they have less knowledge of available social services, they also have less need for such services. Thus, it appears that living with one's spouse rather than living alone or with other kin reduces the need for and use of formal social services.

The finding that knowledge of social services (an enabling factor which represents access to services) affects the use of services by this group more than social demographic variables (predisposing factors) is important, inasmuch as such enabling factors, where they operate, are likely to result in more efficient use of the formal service system. Use of services predicated upon the predisposing characteristics of the in-

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dividual alone are more likely to be inappropriate, given the concomitant lack of information about the proper and judicious use of available services. The provision of relevant information about social services alone, however, does not necessarily have any impact on utilization behavior. A necessary prerequisite for effectively interpreting and using raw information about services is prior relevant and sufficient education. To the extent that older Hispanics are sufficiently educated about formal services, the use of services should continue to be based upon such information assuming of course, need for services exist in the first place. Thus, the provision of information about formal services must be coupled with a comprehensive program of education in order to achieve the desired results regarding service use. It should be noted that while our findings indicate that an individual's level of knowledge of social service is a better predictor of use than other factors (i.e., predisposing and need variables), we would be remiss if we conclude that Hispanic elderly use services simply because they are aware (knowledgeable) of them rather than using them because they have a need for them. For numerous reasons, not addressed in this study, it is more likely that a substantial number of Hispanic elderly, though in need, do not use available services because they lack relevant information bases regarding them. This raises an important policy and program issue as to how the formal service system might provide relevant knowledge to this group, especially those in need of formal services for assistance. It is important in this regard to note that the informal and quasi-formal social support systems among the Hispanic elderly, serve as important sources of information processing, dissemination, and mutual aid (e.g., for some Hispanic elderly these systems

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complement the services provided by the formal service system; for others however, these systems act as alternatives or substitutes to the use of the formal service systems). Consequently, formal service organizations would do well in establishing systematic relationships with these community-based support systems which serve as boundary spanning agents and linking resources to the outside world, especially for Hispanic elderly in need of formal assistance. Moreover, staff (both professional and paraprofessional) in these organizations, who are responsible for the direct provision of services; need to be trained as support system specialists, whose primary tasks would be to provide relevant information and linkage services (e.g., act as major sources of referral to appropriate community-based service facilities) to the Hispanic elderly needing formal assistance. These system specialists must of course, be knowledgeable of Hispanic culture, language, and social organization and must understand the nature of the relationship between older Hispanics and informal and quasi-formal social support systems. Such knowledge, in part, will assist service providers in differentiating between factors that represent cultural characteristics, values, and differences and those that represent individual and social deficits.

Because of the attrition in life space that accompanies advancing age, some research suggests that there is a positive relationship between age and greater exposure to and reliance on mass media sources of information (Schramm, 1969). More specifically, there appears to be an increase in exposure to television and newspapers beyond the age of sixty. If this is true, and we assume it is, the distribution of relevant information regarding formally organized services could be facilitated by use of mass media resources, especially those resources that are bilingual and focus

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their attention on Hispanic communities.

The central purpose of this study was to systematically examine the pattern of relationship among factors presumed to influence the utilization of social services by the Hispanic elderly. The importance of the roles that informal and quasi-formal social support systems play in the use of formal social services was given careful consideration. In effect, the findings underscore the importance of these social systems as information processing and dissemination structures among the Hispanic elderly, especially those in need of formal social service assistance. Moreover, the findings suggest a need for the formal service system to intergrate its programs into existing social organizations and support systems within the Hispanic community rather than ignoring the influential role these systems play in sustaining the lives of Hispanic older persons. This will require in part, a clear understanding of the correlates and predictors of service use if policymakers and service providers are to design, implement, and operate programs that effectively reach the Hispanic elderly and make the most efficient use of limited resources. The formal service system and the informal and quasi-formal support systems must work together in attempting to meet the needs of this group.

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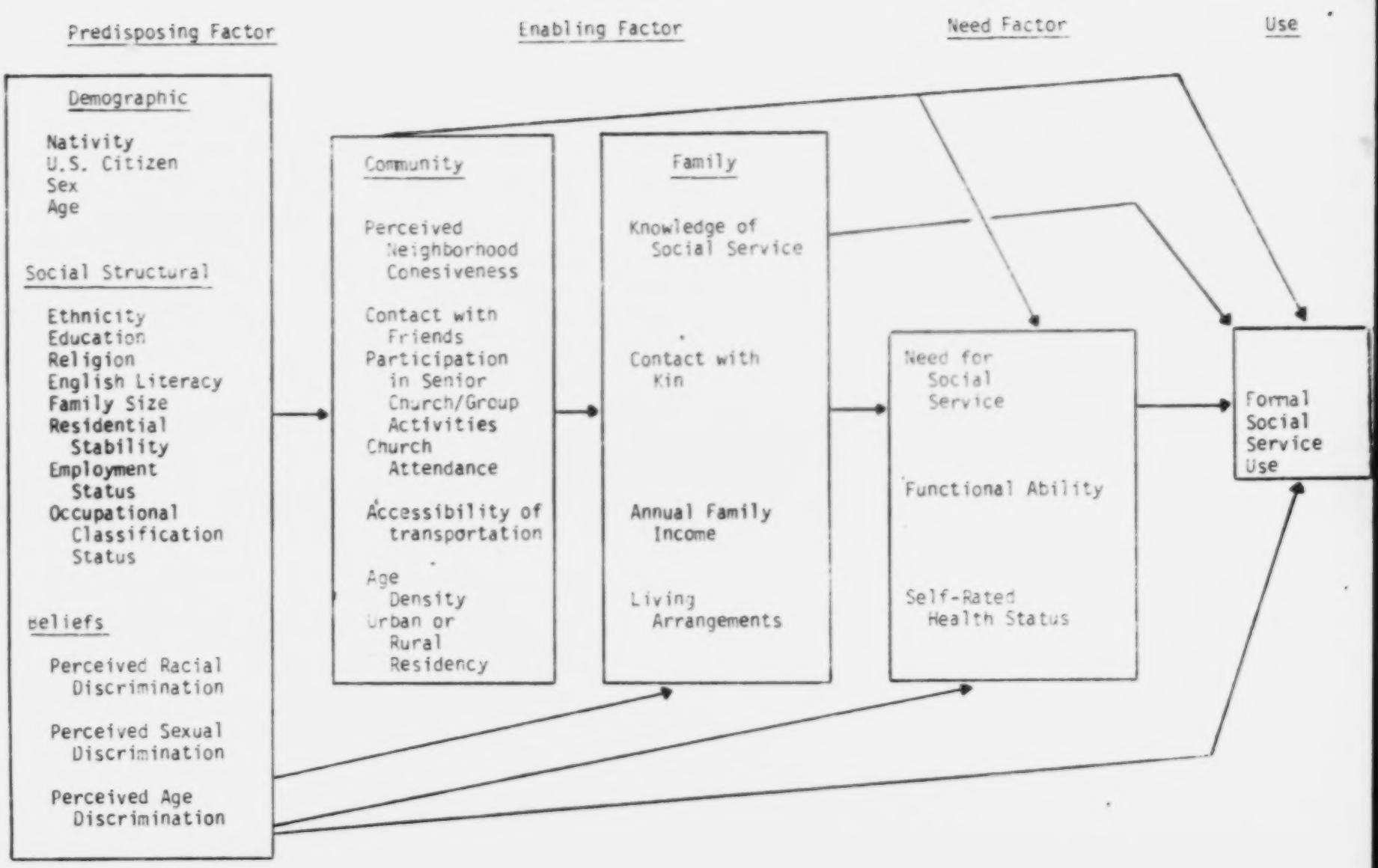

Figure 1. Hypothesized Causal Model of Social Service Utilization

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Table 1

Partial Regression Coefficients (Beta weights) of Significant Variables with Utilization and Variables Having Significant Direct Effects with Utilization. (N=1805)

	Utilization of Formal Services	Need for Services	Self Rated Health Status	Knowledge of Services	Family Income	Ethnicity Cuban	Ethnicity Puerto Rican	Ethnicity Centra & Soui Americ
Need for Services	.25							
Self-Rated Health Status	-.09	-.11						
Knowledge of Services	.45							
Ethnicity								
Cuban	.09							
Puerto Rican	.07	.11		.07				
South & Central Am.				-.11				
Family Income	-.15	-.11	.21					
Functional Ability		-.07						
Age Density		-.14				-.12		
Church Attend.						-.14	-.27	-.21
Housewife vs. Retired			.09					
Working vs. Retired			.25		.22			
Age			.11					
Visits Relatives				.05	.45			
Visits Neighbors				.17	.06			
Lives w/spouse						.08	-.11	-.06
Lives Alone				.11		-.07	.10	
Senior Participation Groups/ Activities				.13				
Urban-Rural Residence				-.12		.10	.12	
English Literacy				.10	.17			
R^2	.35	.09	.10	.14	.34			

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